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FM AMEMBASSY HANOI  
TO RUEHC/SECSTATE WASHDC 3570  
INFO RUEHHM/AMCONSUL HO CHI MINH 1903  
RUEHZN/ASEAN REGIONAL FORUM COLLECTIVE  
RUEHZN/ENVIRONMENT SCIENCE AND TECHNOLOGY COLLECTIVE  
RUEHUL/AMEMBASSY SEOUL 2998  
RUEHKO/AMEMBASSY TOKYO 5582  
RUEHHK/AMCONSUL HONG KONG 0996  
RUEHGZ/AMCONSUL GUANGZHOU 0723  
RUEHCN/AMCONSUL CHENGDU 0262  
RUEHSUN/USUN ROME IT  
RUEHIN/AIT TAIPEI 1406  
RUEAIIA/CIA WASHINGTON DC  
RUEHPH/CDC ATLANTA GA  
RUEAUSA/DEPT OF HHS WASHINGTON DC  
RUEHRC/DEPT OF AGRICULTURE WASHINGTON DC  
RUEKJCS/SECDEF WASHINGTON DC//USDP/ISA/AP//  
RHMFISS/CJCS WASHINGTON DC//J2/J3/J5//  
RHEFDIA/DIA WASHINGTON DC//DHO-3//  
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UNCLAS SECTION 01 OF 02 HANOI 002512

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STATE FOR EAP/MLS, EAP/EP, INR, OES/STC, OES/IHA, MED  
STATE PASS TO USAID FOR ANE AND GH  
STATE PASS TO HHS/OGHA (WSTIEGER, EELVANDER AND ABHAT)  
USDA PASS TO APHIS  
DEPARTMENT OF DEFENSE FOR OSD/ISA/AP (LSTERN)  
BANGKOK FOR RMO, CDC, USAID (JMACARTHUR AND MBRADY)  
ROME FOR FAO

E.O. 12958: N/A

TAGS: [TBIO](#) [KFLU](#) [AMED](#) [AMGT](#) [CASC](#) [EAGR](#) [PINR](#) [SOCI](#) [VM](#)

SUBJECT: VIETNAM - SEPTEMBER 29 AVIAN INFLUENZA REPORT

REF: HANOI 2361 AND PREVIOUS

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1. (U) There have been no reported human AI cases and no confirmed AI outbreaks in poultry to date this year in Vietnam.

2. (U) On September 29, state-owned media reported that the Government of Vietnam (GVN) has vaccinated 28.6 million poultry in 27 provinces and cities since the national vaccination campaign began in February 2006.

3. (U) Several national newspapers reported on September 27 that a male Vietnamese traveler was being tested for AI after exhibiting flu-like symptoms upon disembarking a Vietnam Airlines flight from Hanoi via Ho Chi Minh City to Sydney, Australia. An Australian health official was quoted saying that it is unlikely the patient is infected with avian influenza.

4. (U) On September 19, Vietnam News Agency reported that the U.S. Agency for International Development (USAID) is providing USD 1.55 million for a new project to fight avian influenza in Vietnam and Laos. Through USAID's Regional Development Mission and Abt Associates Inc., a new partner in the regional effort, community-level projects will carry out surveillance and control activities against avian influenza in both countries. Working in close collaboration with current USAID partners, including the U.N. Food and Agriculture Organization (FAO), the U.N. World Health Organization (WHO), and the Academy for Educational Development (AED), Abt will conduct activities with international non-governmental organizations such as CARE International and Population Services International (PSI) in targeted geographic

regions with a high risk of avian influenza outbreaks. These activities include delivering key prevention messages, implementing strategies to minimize high-risk behaviors, working with human and animal-health workers to enhance their ability to recognize and report suspected cases and developing new approaches for enhancing biosecurity on poultry farms. Including this project, USAID has provided over USD 41 million to date for avian influenza activities in Cambodia, China, Indonesia, Laos, Thailand, and Vietnam.

AI in Review: Vietnam-Australia Workshop on SARS and AI

15. (U) On September 14-15, Vietnam and Australia co-hosted a workshop on "the role of military and civil cooperation in the prevention and control of communicable diseases such as SARS and Avian Influenza." The focus of the workshop was to develop a cooperative regional approach to disease surveillance and early response systems, with civil/military cooperation. The workshop began with a presentation by a World Health Organization (WHO) representative from the Philippines. WHO reported that as of September 7, 2006 there are 241 confirmed human cases of Avian Influenza (AI), with 141 resulting in death, representing a 55 percent death rate. The majority of publicly reported new cases of AI in humans have occurred in Indonesia.

16. (U) The WHO thinks the risk of a pandemic is still great. WHO is planning for three possible scenarios: 1) outbreaks continue in humans and poultry, but there is no evolution of H5N1; 2) human-to-human transmission occurs, causing a surge of AI cases and a subsequent pandemic; 3) a pandemic in humans occurs, but the transmission of H5N1 is not efficient resulting in cluster cases only. WHO noted that historically, pandemics occur every 30-40 years and the last human pandemic was in 1968.

17. (U) The WHO continued with a list of key strategic actions in

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response to a human pandemic. WHO first noted that Asian countries, including Vietnam, continue to have weak early-warning systems and high-risk behavior. Among the key actions to be taken is the strengthening of early-warning systems by improving detection of animal cases first and sharing information throughout the region about existing animal cases. Additionally, high-risk countries should aim to reduce exposure to H5N1 through education, compensation, and communication. Every nation should build and increase its capacity to cope with a pandemic. This should be done by completing an overall economic assessment in addition to increasing vaccination supplies. Finally, WHO emphasized that non-medical interventions will be essential if/when a pandemic occurs. Medical supplies and assistance may not be immediately available; therefore officials should be prepared to implement non-medical strategies such as quarantines and travel restrictions.

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